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Would L.A. Times lockups protect foster youth?

L.A. County officials debate benefits, risks of confining some children targeted by sex traffickers.

BY GARRETT THEROLF

It's a universal principle: Lock up the criminal not the victim.

No one has ever doubted that the pimps who brazenly exploit the foster care system to profit from the sex trade are criminals. But it took awhile for L.A. County decision makers to reach a consensus that the vulnerable children these pimps recruit are not.

Now some of the same decision makers are deadlocked on a more complex question: When, if ever, is it OK to lock up the victims — foster children, some as young as 10 — to protect them from aggressively manipulative pimps?

In Los Angeles County, foster care authorities, the district attorney, the sheriff, supervisors and voters all have resolved over the last three years that sex-trafficked youth should no longer be tried and incarcerated as criminals, but rather sheltered in foster care and offered services to protect them and help them heal.

[See Foster care, B6]

[Foster care, from B1]

But as county supervisors debate establishing a treatment center for these youth, the issue of locking up foster children has become a quagmire.

On one side are those who say the state should act like a responsible parent to stop children from leaving their home to meet pimps and johns. On the other side are those who say that locking up children mirrors the confinement that predators subject them to, and will ultimately fail to cure the problem.

"This is really *the* issue that everyone keeps coming back to," said Allison Newcombe, an attorney with the Alliance for Children's Rights who represents sex-trafficked children. "Everyone has such strong opinions."

Law enforcement officials say criminal gangs have increasingly turned from selling drugs to selling children for sex because a drug can be sold once, but

a child can be sold repeatedly. According to the California Child Welfare Council, a child's life expectancy after being involved in sex trafficking is seven years, with AIDS and homicide being the leading causes of death.

Pimps capitalize on the porous barriers between foster care facilities and the outside world, advocates say, by calling vulnerable children, sending them letters and infiltrating group homes with young recruiters. In some cases, the pimps persuade children to get tattoos of their names.

Supervisor Sheila Kuehl, who opposes efforts to allow locking up foster children who are at risk of being lured into sex trafficking, said the recruitment for prostitution in the county's juvenile detention facilities proves that confining children is not a solution.

Leading the push to establish a locked facility for some foster youth are Los Angeles County's child wel-

fare chief, Philip Browning, and Supervisor Don Knabe. Both are lobbying Sacramento lawmakers to change laws that currently prohibit confining foster care youth who are at risk.

Browning said he reluctantly came to support such an option after social workers watched children as young as 10 and 11 run from county foster care facilities to rendezvous with pimps and johns.

"We have a small number of youth in foster care where our current programs simply haven't worked," Browning said. "Frankly, I'm not certain that the current facilities provide the level of security that I would like."

Voters overwhelmingly approved Proposition 35 in 2012 to greatly increase penalties for pimps who traffic minors, but prosecutions have not kept pace with the problem.

Traditionally, youth involved in prostitution were sent to delinquency lockups in California until the pas-

"This is really *the* issue that everyone keeps coming back to."

— ALLISON NEWCOMBE,
an attorney with the Alliance
for Children's Rights

sage of the measure, which states that such minors are victims of human trafficking and should not be treated as criminals.

County officials responded by training police officers, prosecutors and other workers to no longer arrest such youth and place them in juvenile hall on prostitution charges. Instead, they were told to call the child abuse hotline so that the youth could enter foster care for protection and treatment.

About 100 minors still are locked in juvenile detention facilities on prostitution

charges because training is in the initial phases. But the system is increasingly diverting them to the county Department of Children and Family Services, and the agency believes that up to 300 of its current foster children have a history of sex trafficking. Authorities can detain them only if they are arrested for a crime or placed under a psychiatric hold because they represent a clear harm to themselves or others.

States nationwide are experimenting with locked and unlocked approaches, but child welfare officials complain that no comprehensive studies have been completed to compare their effectiveness. In Utah and Texas, group homes treat victims in locked facilities, and officials in other states — including California — sometimes send their children to those states so they can be locked up while receiving services.

The problem with sex-trade recruiters is especially acute at the Youth Welcome Center, a holding room on the campus of Los Angeles County-USC Medical Center, where some of social workers' toughest cases stay while awaiting a foster home. A recent Times report detailed a case of suspected recruitment for prostitution there. Knabe and Supervisor Hilda Solis announced their support for a locked facility three days later.

Nick Ippolito, Knabe's child welfare deputy, said "the pimps are using our facilities as waystations for these kids, who they treat as commodities, and everyone has acknowledged that these kids are going to run eight to 10 times before they realize the terrible situation they are in and are more interested in services."

In rare instances, children who have been exploited by pimps have asked to be placed in a locked facility, according to child welfare officials.

"They ask to be in locked facilities because they know if they don't ... go back to their pimp, there will be consequences," Newcombe said.

Kim Biddle, the executive director of Saving Innocence, a leading group working with sexually exploited youth, is one of the experts being consulted by county supervisors. She said the issue is so controversial, "I don't know if I should give an opinion publicly." She reluctantly endorsed a locked option for some of the youth.

"We, as the state, are responsible for children who have endured the highest levels of trauma imaginable ... they feel such a strong sense of Stockholm syn-

drome that they would run back to their trafficker's arms," Biddle said. "They have been told that their whole family would be killed if they don't."

Under the plan envisioned by Browning and Knabe, some of the sexually exploited youth at the highest risk of running away would be placed in lockup on a DCFS recommendation and under orders from a judge who would reevaluate the decision every 30 days. While there, the youth would receive intense mental health treatment, mentorship by survivors of sex trafficking and other services.

But Browning acknowledges that, for the plan, "the support is not there." The County Welfare Directors Assn. of California rebuffed his request to endorse locked facilities as an option for some youth. And the Board of Supervisors' vote stalled after Kuehl voiced opposition.

"I hate to sound like too much of a real American but I believe in the justice system," Kuehl said. "If you have committed a crime, you get a trial. If you haven't committed a crime, you are entitled to be treated as a free citizen and we don't lock you up." Kuehl said the recruitment for prostitution in the county's juvenile detention facilities proves that locked facilities don't stop sex trafficking.

Kuehl and Browning were in agreement that foster families are the best possible option for most of the youth involved in sex trafficking, and the county is working with the state to gain approval for special "treatment foster parents" who would be paid significantly more money than regular foster parents so they can quit their jobs if needed and focus singularly on the youth.

But even if state approval for treatment foster parents is granted, Browning said he still sees a need for locked facilities for those children most vulnerable to relentless pimps.

Supervisors Mark Ridley-Thomas and Michael D. Antonovich have remained publicly neutral on that proposal.

Solis, who initially supported Browning's plan, issued a statement following the delayed vote that she "preferred" unlocked facilities. Her spokeswoman declined to say whether she would still allow a locked option.

Knabe pledged to force a vote on the issue later this month.

PUBLIC HEALTH

Vaccine data for children lacking

Nearly one-third of all county preschools didn't submit report on immunizations to the state

By Lauren M. Whaley

CHCF Center for Health Reporting

While the ongoing measles outbreak has focused attention on vaccination rates at kindergartens, the even more vulnerable population at preschools and day cares may also be at risk from vaccine-preventable diseases.

Yet, in Los Angeles County, which has seen 33 confirmed cases of measles, it's difficult to determine preschool vaccination rates. Nearly 30 percent of county preschools failed last fall to submit state-required vaccination data.

And, under current law, there's little the state or parents can do about it.

In Los Angeles County, 87.7 percent of its preschoolers and day-care kids over age 2 were up to date on their shots at the beginning of this school year, state data show.

Statewide, 89.4 percent of kids at child-care facilities were fully immunized when they started last fall. That's below the Centers for Disease Control and Prevention's recommended threshold of a 92 to 95 percent vaccination rate required for "herd immunity," which experts say protects a community from infectious diseases.

And, that figure — 89.4 percent — reflects only schools that reported their rates.

Twelve percent of childcare facilities statewide — 1,266 out of 10,537 — failed to submit their required reports to the California Department of Public Health last fall. In Los Angeles County, the number of preschools that failed to submit the required report was staggering — 798 facilities out of the county total of 2,799.

The state, however, has no teeth to force child-care facilities and preschools to report their vaccination rates. And there is nothing in proposed legislation that would change that.

"CDPH does not have enforcement authority over these state statutes and regulations," said Dr. Gil Chavez, deputy director and state epidemiologist for CDPH. "CDPH notifies the California Department of Social Services of the facilities who fail to submit reports and notifies the facilities that we have reported them to CDSS."

The state Department of Social Services is in charge of licensing child-care facilities and making sure they have up-to-date records on each student. But they do not compel facilities to submit fall vaccination rates to the state health department.

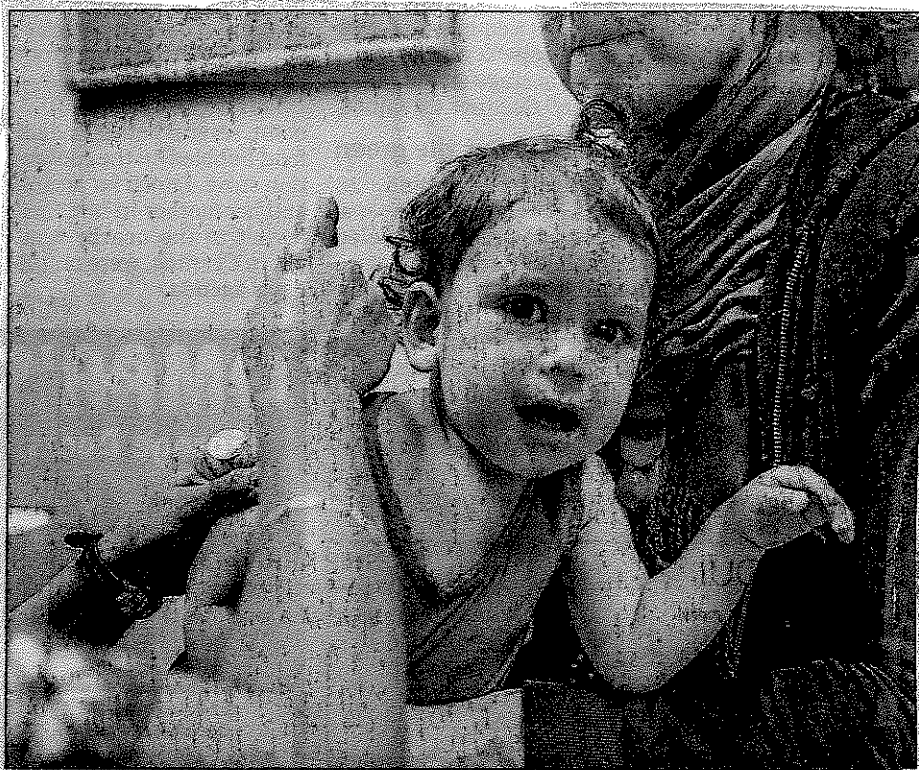
"We visit facilities every day," said CDSS spokesperson Michael Weston. "We're mandated to inspect a facility every five years, but we're at the facilities far more often than that."

Of those that did report fall numbers, 16 Los Angeles County preschools and day-care centers stand out with zero of their children completely up to date on required immunizations.

Those schools range in enrollment from 13 students at Our Lady of Lourdes Early-Fives in Northridge to 122 students at Bethany Preschool in Long Beach and 186 students at Vine Street Early Education Center in Los Angeles.

Administrators at some preschools said there are various reasons why children may not have their full vaccinations. Some parents place their kids on a delayed schedule, while others opt them out of vaccinations altogether.

At Great Beginnings Preschool, a private school in Valley Village, 41 of its 43 admitted children were enrolled for the 2014-15 school year without all their required shots, according to state data. This "conditional" admission requires them to finish their vaccination series as soon as possible. Thirty-eight children had received their first MMR shot, the vaccine that



LAUREN M. WHALEY — CHCF CENTER FOR HEALTH REPORTING

A 1-year-old receives her first MMR shot, which will help protect her against measles. State data show 87.7 percent of preschoolers and day-care children over age 2 in L.A. County were up-to-date on their vaccinations at the beginning of the school year.

**PERCENTAGE OF CHILD CARE ENTRANTS
WITH ALL REQUIRED IMMUNIZATIONS
(2014-2015):**

Statewide: 89.37%
San Bernardino: 95.32%
Riverside: 92.49%
Santa Barbara: 89.79%
San Diego: 89.51%
Ventura: 88.44%
Los Angeles: 87.77%
Orange: 87.75%

**PERCENTAGE OF CHILD CARE FACILITIES
WHO REPORTED (2014-2015):**

Statewide: 87.99%
Orange: 100%
Santa Barbara: 100%
San Diego: 100%
Ventura: 100%
San Bernardino: 99.75%
Riverside: 99.44%
Los Angeles: 71.49%

Source: California Department of Public Health

protects against measles.

Owner Lana Costache said the December measles outbreak at Disneyland, which has been linked to low vaccination rates, had little effect on parents' attitudes toward vaccines.

"There was no increase in concern," she said. "In fact, no one asked."

At Bethany School, a preschool in Long Beach, the data show 122 children enrolled in the fall, though administrator Tonia Hill said there are now 130 children. She said every child at the school has to have a vaccination record even if it shows their shots are not up to date. Reasons a kid may not have all the required shots include alternative schedules, medical conditions or personal exemptions, which, by state law, have to be signed by a health care provider.

Countywide, 9.32 percent

of Los Angeles County's 119,268 preschool and day-care kids were undervaccinated, entering school as "conditional entrants," with immunizations started but not completed. That does not include an additional 2.22 percent of county preschoolers who were unvaccinated entirely due to personal belief exemptions and the 0.69 percent of kids with permanent medical exemptions.

Statewide, 7.4 percent of preschoolers, or 35,997 kids, started the year as "conditional entrants."

Students may enter school on a conditional basis if they have received at least one dose of each required vaccination and are not yet due for subsequent doses. The condition is that they get up to date as soon as the shots are due.

Parents whose children are categorized as condi-

tional entrants are notably different from those who do not vaccinate their children due to personal beliefs. Those who have sought personal belief exemptions, however, may not have that option next year if new legislation introduced by Sens. Richard Pan, D-Sacramento, and Ben Allen, D-Redondo Beach, is passed. Their bill would repeal the personal belief exemption that currently allows parents to opt their child out of vaccines.

For child care and preschool, children should be up to the date by the time they are 18 months. By this age, a child should have received three doses of the polio vaccine, four doses against pertussis (whooping cough), one dose of MMR (measles, mumps and rubella), three doses for hepatitis B, one dose against chickenpox and one dose of

hib, which prevents against meningitis and other serious bacterial infections.

Of the 122 children enrolled at Bethany according to the state data, 95 percent have had their first MMR shot. Still, the data show that 92 percent were admitted without complete vaccinations with the promise that they would get up to date.

"There have been a few parents who have elected not to have vaccines," Hill said, but none of those have changed their minds since the measles outbreak.

Parents can use the state health department's Shots for School website to look up preschool and child-care immunization rates from the fall reports.

But, because there is no additional reporting requirement, parents must contact facilities directly to find out current rates. For those schools that did not submit a report, it is also up to parents to ask individual institutions for their immunization numbers.

Sen. Tony Mendoza, D-

Artesia, recently introduced a bill that will require workers at day-care facilities to be vaccinated against measles, pertussis and influenza. Whether his bill will have enforcement teeth remains to be seen. It says nothing about preschools reporting enrollee vaccination rates.

While day cares and preschools may admit younger children, the state immunization data counts only those who are between the ages of 2 and 4 years, 11 months.

The number of kids at preschools and day cares that reported data to the state totaled 486,634 statewide.

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Los Angeles News Group staff writer Susan Abram contributed.



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Finally—A Bill To Help Foster Care Children, Not Big Pharma

By Kelly Patricia O'Meara
March 20, 2015

In light of a *San Jose Mercury News* investigation "Drugging Our Kids" exposing the massive psychotropic drugging of children under California's foster care system, which found nearly 25% of adolescents in California's foster care system are prescribed mind-altering psychotropic drugs, lawmakers are now understanding the urgency of legislation to curb this abusive practice.



In California, Assemblyman Mike Gipson (64th District) has submitted language, amending existing legislation (AB 1067), providing for specific protections from psychiatric/medication abuse of children under state care. Supporting groups, such as the Citizens Commission on Human Rights (CCHR) say it is the first legislation to serve foster children rather than psychiatric pharmaceuticals. The California branch of the NAACP has written to state legislators in support of the bill, saying it would "ensure that foster children in California are afforded the same rights to refuse psychotropic medication which are given youths confined in a state juvenile facility."

Assembly Bill 1067 will work towards necessary improvements, "which include making sure our foster children have a say about what medication they are given."

—
Assemblyman Mike
Gipson (64th District)

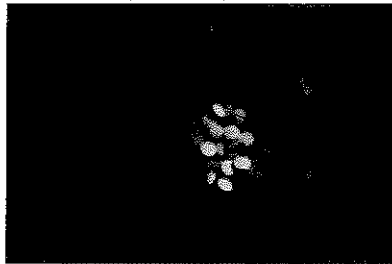
According to Gipson, Assembly Bill 1067 will work towards necessary improvements, "which include making sure our foster children have a say about what medication they are given."

Assemblyman Gipson's legislation would be an important step in correcting the wholly inadequate protections within the system. Specifically, Assemblyman Gipson's legislation addresses informed consent issues and rights for minors and non-minors in foster care, including:

- To be informed of the risks and benefits of psychotropic medication.
- To appear before the judge determining if psychotropic medication should be administered, with an advocate of his or her choice, and state that he or she objects to any recommendation to prescribe psychotropic medication.
- The availability to refuse the administration of psychotropic drugs.
- To have a prescribing doctor disclose any financial ties he or she may have to pharmaceutical companies.

* The latter is in response to the increasing pharmaceutical influence on prescribing physicians. It was revealed by *Mercury News* that between 2010-2013 drug makers spent more than \$14 million marketing to California doctors treating foster care children and those doctors with high prescription rates typically received the most funding. Gipson's legislation would force physicians prescribing to foster children to disclose all pharmaceutical funds received, potentially disbaring these doctors from treating foster care children.

A good example of this much needed physician oversight involves the prescribing of the antipsychotic, Risperdal, which not only is being prescribed in California at alarming rates but is the subject of some 700 product liability lawsuits in California alone, many involving children who were allegedly harmed by the drug.



Many of the claims surrounding Risperdal involve gynecomastia allegations—a condition that causes young males to grow female breasts. In February, a Philadelphia jury awarded Austin Pledger \$2.5 million in damages because he “was not adequately warned” that he would grow size 46DD breasts as a side effect of using the antipsychotic. Pledger, who has autism, was 8 years

old when he first was prescribed Risperdal. The drug label falsely reported that the risk of gynecomastia was low. To this day, Pledger has female-like breasts that can only be removed through a mastectomy.

Between 1996-2001, the Medi-Cal Drug Use Review Board found Risperdal represented its second highest fee-for-service expenditures among a list of more than 1,700 drugs.

It is drugs like Risperdal being prescribed to foster children that make this legislation all the more important. National President of CCHR, Bruce Wiseman, applauds Assemblyman Gipson's legislative efforts. Wiseman stated, “Psychotropic drugs cause harm and no foster child should be forced to take them.”

“The courts,” explained Wiseman, “are beginning to understand the harmful effects of these drugs and award children millions of dollars because of the irreversible damage caused by antipsychotics. Based on publically available data, child drugging is a nationwide epidemic. We need legislation like that being considered in California to give foster kids the right to object to and refuse these drugs in every state.”

Attorney Allison Folmar is intimately aware of the devastation caused by the use of antipsychotics on children. Folmar represented Detroit mother, Maryanne Godboldo in her fight against state child protective services, not to drug her then 13-year old daughter with Risperdal.



Attorney Allison Folmar (left) with Detroit mother Maryanne Godboldo (right)

* According to Folmar, “Foster children are prescribed psychotropic drugs at rates nearly five times higher than non-foster children. These drugs can cause life-threatening diabetes, violent and suicidal behavior and even brain shrinkage. That is being done to children who already are traumatized.... We need to turn such turmoil into triumph by changing the laws—state-by-state—until every child is protected.”

In order to do the right thing, to legitimately uphold the mission of the California Department of Social Services—“to serve, aid, and protect needy and vulnerable children...”—support of Assemblyman Gipson's legislation is a hopeful first step in ebbing the tide of dangerous psychiatric prescribing.

Sign CCHR's Petition to Prevent the Dangerous Psychotropic Drugging of California's Foster Care Youth [here](http://www.cchrint.org/2015/03/20/finally-a-foster-care-bill-to-help-children-not-big-phar...).